SUMMARY FORM

COLLECTIVE BARGAINING AGREEMENT PUBLIC SECTOR / NON-POLICE & NON-FIRE

Section I: Agreement Deta Public Employer:	alls Borough of Collingswood County: Caunder						
	Teamsters Local	Union No. 830			, , , , , , , , , , , , , , , , , , , ,	Employees in Unit: 15	
Employee Organization			a la la na C				
Base Year Contract Term: 1/1/2012 12/31/2015			New Contract Term 1/1/2016 12/31/2018				
Type of Settlement:	Mediated Settle	ement	act-Finder Recomme	endation 7	Voluntary Settlement Supe	r Conciliation	
			Base Year	turn A - Total Costs twicus agreement	Column B New Base Year - Total Costs (First Year of Successor agreement)		
Section II: Economic							
ttem 1 Sale	ary	_	\$665,071		\$678,372		
	ement	_			444.44		
	gevity	_	\$48,818	 .	\$48,865		
	ing Allowance	_	\$4,500		\$4,500		
	Call Stipend		\$68,608		\$89,984		
ltem 6		_					
Nem 7		_	-				
hem 8		_	-				
Item 10		_	·				
item 11		_					
Rem 12		_		-			
Any additional items is too separate th	rul .	Additional flems		_			
							
Section III: Totals - Sum of costs in each column		\$784,997		\$801,721			
			(Total)	(Total)		
Section IV: Analysis of new success	kor agreement		NEWAGRE	EMENT ANALYSIS		4	
Total Base Year(previous a greeners)	\$784,997						
Effective Date (m/d/yyyr)		1/1/2016	1/1/2017	1/1/2018			
Percentingrose		2%	2%	2%			
Total cost of increase		\$18,724	\$16,034	\$16,355			
Total lease salary (successor agreemen	4	\$801,721	\$817,755	\$834,110		_	
Section V: Impact of Settlem	-	orease over term of ag	reement				
Percentage Impact (average per year o		2.00					
Bollar impact (average per year over te	n of agreement)	\$16,371.00					
Section VI							
Health Insurance (Indicate costs associ	rinders are to food						
Transfer and the product come goods	and the same of th	Base Year	Year I				
Cost of Health Plan	••••••	\$273,429	\$273,429				
Employee Contributions		\$32,782	\$33,697				
Prescription	********						
Destal	***************	\$11,004	\$11,004				
Vision	********						
The undersioned certifies th	at the foregoing figur	es are true and is awa	re that ill any of the s	foregoing Items are false	she is subject to punisment.		
Section VII			•				
Prepared by:	Elizabeth	Pigliacelli		Title;	Chief Finance Officer		
•	Print Name						
	5/4	w \ /		Date:	7/19/2016	_	
	(Signature				_	
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